

# CLAIMS ONLY

SERIAL NO. \_\_\_\_\_ FILING DATE \_\_\_\_\_

APPLICANT(S) \_\_\_\_\_

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
2						
3						
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48						
49						
50						
TOTAL IND.	4					
TOTAL DEP.	24	↔	↔	↔		
TOTAL CLAIMS	33					

*	*	*	*
IND.	DEP.	IND.	DEP.
51			
52			
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98			
99			
100			
TOTAL IND.		↔	
TOTAL DEP.		↔	↔
TOTAL CLAIMS			↔

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS